PATENT APPLICATION FEE DETERMINATION RECORD

7′.

Effective October 1, 2001

Application or Docket Number

10025199

		CLAIMS AS	S FILED -	•	SMALL ENTITY			OTHER THAN				
_			(Column 1)		(Column 2)		•	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			50					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			30 minus 20=		* 10			X\$ 9=	90	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		0			X42=		OR	X84=	
ML	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2				TOTAL	450	OR	TOTAL	
CLAIMS AS AMENDED - PART II									1		OTHER	THAN
		(Column 1)		(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	F OL ALLA	=		X42=		OR	X84=	
L	FINST PRESE	INTATION OF IM	ULTIPLE DE	PENDEN	CLAIM		ا ا	+140=		OR	+280=	
										OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	,	ADDIT. FEE	<u></u>		ADDII. I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	JLTIPLE DEF	PENDENT	CLAIM		ŀ				000		
L								+140= TOTAL		OR	+280=	
ADDI										OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colui		(Column 3)	3					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	**	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ĺ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM		1	+140=				
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		nber Previously Pa					er fou	nd in the app	ropriate box	in col	umn 1.	